Image# 14952798840 PAGE 1 / 8

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTTIM OX FO	or Otner	Than An Autr	iorizea Com	mittee		Office Use Only
NAME OF TOMORDO COMMITTEE (in full)	TYPE OR F	RINT ▼	Example: I over the line	f typing, type nes.	12FE4M!	5
IMPACT COMMITTEE						
	100 LUN	A PARK DRIVE				
ADDRESS (number and street) ▼	STE. 156					
Check if different than previously					.,,	
reported. (ACC)	ALEXAN	DRIA			L VA	22305
2. FEC IDENTIFICATION NUM	MBER ▼	CIT	Y A		STATE ▲	ZIP CODE ▲
C C00525238			THIS EPORT X	NEW (N) OR		MENDED A)
4. TYPE OF REPORT (Choose One)	(b) Mon Repo	ort On:	20 (M2)	May 20 (M5		y 20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar	20 (M3)	Jun 20 (M6) Sep	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1	,	Apr	20 (M4)	Jul 20 (M7)	Oct	20 (M10) Jan 31 (YE)
July 15	(C)	12-Day PRE-Election	Primar	/ (12P)	General	(12G) Runoff (12R)
Quarterly Report (Q2 October 15		Report for the:	Conver	ntion (12C)	Special	(12S)
Quarterly Report (Q3 January 31		Election	n on	M / D D /	YIYIY	in the State of
Year-End Report (YE July 31 Mid-Year Report (Non-election	(d)	30-Day POST-Election		al (30G)	Runoff	
Year Only) (MY) Termination Report		Report for the:	denera	1 (300)	Hunon	Soft) Special (303)
(TER)		Election	n on 11	M / D D / 04	2014	in the State of
5. Covering Period 10	/ 16	2014	thro	ugh 11	/ D D D 24	2014
I certify that I have examined this	Report a	nd to the best of	my knowledge	and belief it is	true, correct ar	nd complete.
Type or Print Name of Treasurer	Diana Su	e Vaughn				
Signature of Treasurer Diana	Sue Vaughn		[Electro	onically Filed]	Date 12	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erroned	ous, or inco	mplete information	may subject th	e person signing	this Report to	the penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name IMPACT COMMITTEE 10 16 2014 24 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 22721.02 January 1, 2014 (b) Cash on Hand at 9961.02 Beginning of Reporting Period..... 58700.00 12500.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 22461.02 81421.02 6(a) and 6(c) for Column B)..... 5003.00 63963.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 17458.02 17458.02 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

	$\sim \sim T$	\sim	MITTEE
11\/11	<i>-</i> Δ()	(()1\/11	\/III I I I I

Report Covering the Period: From: 10	16 2014 To:	11 24 2014		
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
1. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	0.00	16700.00		
(i) Itemized (use Schedule A)	7	7		
(ii) Unitemized	0.00	0.00		
(iii) TOTAL (add	, <u>, , , , , , , , , , , , , , , , , , </u>			
Lines 11(a)(i) and (ii)▶	0.00	16700.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	40500.00			
(such as PACs)	12500.00	42000.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	12500.00	58700.00		
Totals to Line 33, page 5)	12300.00	33700.00		
2. Transfers From Affiliated/Other Party Committees	0.00	0.00		
rarty Committees	0.00	5.55		
3. All Loans Received	0.00	0.00		
I. Loan Repayments Received	0.00	0.00		
5. Offsets To Operating Expenditures	7			
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
6. Refunds of Contributions Made	7	7		
to Federal Candidates and Other				
Political Committees	0.00	0.00		
7. Other Federal Receipts				
(Dividends, Interest, etc.)	0.00	0.00		
3. Transfers from Non-Federal and Levin Funds		,		
(a) Non-Federal Account	200			
(from Schedule H3)	0.00	0.00		
	0.00	200		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	200		
(c) Total Transiers (add To(a) and To(b))	0.00	0.00		
Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	12500.00	58700.00		
D. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	12500.00	58700.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

0.00	Calendar Year-to-Date
7	0.00
0.00	
0.00	0.00
3.00	5463.00
3.00	5463.00
0.00	0.00
4000.00	57500.00
0.00	0.00
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0.00	0.00
0.00	0.00
0.00	0.00
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0.00	0.00
0.00	0.00
	0.00
0.00	0.00
0.00	0.00
1000.00	1000.00
,	, ,
222	2.00
0.00	0.00
0.00	0.00
200	0.00
0.00	0.00
0.00	0.00
5003.00	63963.00
5003.00	63963.00
	3.00 0.00 4000.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 20 1 01111 01 (Nov. 02/2000)	i ago 🗸		
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12500.00	58700.00	
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12500.00	58700.00	
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	3.00	5463.00	
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3.00	5463.00	

SCHE	OULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 OF 8				
· · · · · · · · · · · · · · · · · · ·			Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS			for each category of the	11a 11b X 11c 12				
			Detailed Summary Page	13 14 15 16 17				
				erson for the purpose of soliciting contributions to solicit contributions from such committee.				
\ \	OF COMMITTEE (In Full) ACT COMMITTEE							
/								
	ame (Last, First, Middle Initial) ERAL DYNAMICS CORPORATION POL	ITICAL ACTI	ON COMMITTEE (GDC PAC)	Date of Receipt				
Mailing	Address 2941 FAIRVIEW PARK DR.			M = M / D = D / Y = Y = Y				
0:1-	SUITE 100	01-1-	7'- 0-1-	10 24 2014				
City FALLS	S CHURCH	State VA	Zip Code 22042	Transaction ID : SA11C.4395				
	O number of contributing			Amount of Each Receipt this Period				
	political committee.	C co	0078451	5000.00				
Name	of Employer	Occupation	1	Contribution				
Receip		Aggregate	Year-to-Date ▼					
	Primary General		5000.00					
	Other (specify) ▼		5000.00					
	ame (Last, First, Middle Initial) IATIONAL UNION OF PAINTERS AND ALLIED TRADE	S POLITICAL AC	TION TOGETHER POLITICAL COMM	Date of Receipt				
	Address 7234 PARKWAY DRIVE			M M / D D / Y Y Y Y				
	, , , , , , , , , , , , , , , , , , , ,			11 03 2014				
City		State	Zip Code	Transaction ID : SA11C.4398				
HANO	VER	MD	21076	Amount of Each Receipt this Period				
	O number of contributing	C co	0000885	5000.00				
federa	political committee.	0 000	300000	7				
Name	of Employer	Occupation	1	Contribution				
Receip	ot For:	Aggregate	Year-to-Date ▼					
F	Primary General	7.99.094.0						
	Other (specify) ▼		5000.00					
	ame (Last, First, Middle Initial) THEON COMPANY POLITIC	AL ACTIO	ON COMMITTTEE	Date of Receipt				
	Address 1100 WILSON BLVD SUITE 1500			10 29 2014				
City ARLIN	NGTON	State VA	Zip Code 22209	Transaction ID : SA11C.4396 Amount of Each Receipt this Period				
	O number of contributing political committee.	C co	0097568	2500.00				
Name	of Employer	Occupation	1	Contribution				
Receip		Aggregate	Year-to-Date ▼					
	Primary ☐ General Other (specify) ▼		2500.00					
	outer (specify)		2000.00					
	L			12500.00				
SUBTO	TAL of Receipts This Page (optional)		·····	12500.00				

TOTAL This Period (last page this line number only).....

12500.00

SCHEDULE B (FEC Form 3X)		La cala I t ()	FOR LINE I	NUMBER:		PAGE	7 C)F 8
ITEMIZED DISBURSEMENTS		te schedule(s) tegory of the	(check only	nly one)			¬ 05	
		mmary Page	21b 27	22 28a	23 28b	24 28c	25 29	30
Any information copied from such Reports and Stater								
or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	ne and addres	s of any politica	ai committee to	SOIICIT COI	itributions	from such	committe	ee.
IMPACT COMMITTEE								
Full Name (Last, First, Middle Initial)								
A. BILL CASSIDY FOR US SENATE					Disburse			
Mailing Address PO BOX 80505				11	10		2014	Υ
City		Zip Code		Trans	action ID	: SB23.441	ı	
BATON ROUGE	LA 7	70898		ITALIS	action ib	. 3623.441		
Purpose of Disbursement Contribution				Amount	of Each	Disburseme	nt this P	eriod
Candidate Name			Category/				2000.	00
WILLIAM CASSIDY			Туре		7	7	2000.	.00
Office Sought: House Senate President Disburser	nent For: 201 Primary Other (specify	General						
State: LA District: 00	C (opco)	Runoff						
Full Name (Last, First, Middle Initial)								
B. GARRET GRAVES FOR CONGRE	ESS			Date of	Disburse		Y	Υ
Mailing Address PO BOX 64845				11	10	0	2014	
City BATON ROUGE		Zip Code 70896		Trans	action ID	: SB23.441	0	
Purpose of Disbursement Contribution				Amount	of Each	Disburseme	nt this P	eriod
Candidate Name			Category/					-
GARRET GRAVES			Type				1000	.00
Senate	nent For: 201 Primary Other (specify	General						
Full Name (Last, First, Middle Initial)								
$^{ extsf{C}_{+}}$ RALPH ABRAHAM FOR CONGRE	ESS			Date of	Disburse	ment		
Mailing Address P.O. BOX 270				11	13		2014	Y
		Zip Code		Trans	action ID	: SB23.441	2	
ARCHIBALD Purpose of Disbursement	LA 7	71218						
Contribution				Amount	of Each	Disburseme	nt this P	eriod
Candidate Name RALPH ABRAHAM			Category/ Type				1000.	.00
	nent For: 201 Primary	General	Туре				1 4	
State: LA District: 05	Other (specify	?) ▼ Runoff						
		•					4000	00
SUBTOTAL of Disbursements This Page (optional)			·····•	<u></u>			4000.	UU
TOTAL This Period (last page this line number only))					40	4000.	00

Detailed Summary Page 21b 22 23 24 25 25	SCHEDULE B (FEC Form 3X)	Haraman I I I I I I	FOR LINE	NUMBER:	PAGE 8 OF 8
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE Full Name (Last, First, Middle Initial) A. MCSALLY FOR CONGRESS Mailing Address PO BOX 19128 City State Zip Code TUGSON AZ B5731 Furpose of Disbursement Recount Fund Candidate Name MARTHA E MCSALLY Office Sought: Senate Primary General Primary General Primary General Disbursement Candidate Name Mailing Address City State Zip Code Full Name (Last, First, Middle Initial) 3. Mailing Address City State Zip Code Full Name (Last, First, Middle Initial) 3. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Condidate Name Category' Type Office Sought: Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Condidate Name Office Sought: Senate Primary General Other (specify) ▼ State: Zip Code Purpose of Disbursement Candidate Name Category' Type Office Sought: Senate Primary General Other (specify) ▼ Date of Disbursement this Period Category' Type Office Sought: Senate Primary General Other (specify) ▼ State: Disbursement Tor: Senate Primary General Other (specify) ▼ State: Disbursement Tor: Senate Primary General Other (specify) ▼ State: Disbursement Tor: Senate Primary General Other (specify) ▼ State: Disbursement This Page (optional)	ITEMIZED DISBURSEMENTS		I ' — '		
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE Full Name (Last, First, Middle Initial) A. MCSALLY FOR CONGRESS Mailing Address City State Zip Code TUCSON AZ 85731 Purpose of Disbursement Recount Fund Candidate Name MARTHA E MCSALLY Office Sought: Prisadert Callegory Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: Prisadert State: Zip Code Purpose of Disbursement Candidate Name Office Sought: Prisadert State: Zip Code Purpose of Disbursement Candidate Name Office Sought: Prisadert State: Zip Code Purpose of Disbursement Candidate Name Office Sought: Prisadert State: Zip Code Purpose of Disbursement Candidate Name Office Sought: Prisadert State: Zip Code Purpose of Disbursement Candidate Name Office Sought: Prisadert State: Disbursement Candidate Name Office Sought: Prisadert State: Disbursement Candidate Name Office Sought: Prisadert Disbursement Candidate Name Office Sought: Prisadert State: Disbursement Candidate Name Office Sought: Prisadert State: Disbursement Candidate Name Office Sought: Prisadert State: Disbursement Category Type Office Sought: Prisadert State: Disbursement Amount of Each Disbursement this Period Category Type Office Sought: Prisadert State: Disbursement Type Type Type Type Office Sought: Prisadert Type Typ					
Full Name (Last, First, Middle Initial) A. MCSALLY FOR CONGRESS Mailing Address PO BOX 19128 City State Zip Code TUCSON AZ 85731 Purpose of Disbursement Recourt Fund Candidate Name MARTHA E MCSALLY Office Sought: House Senate President State: Zip Code Purpose of Disbursement For: 2014 Recourt Full Name (Last, First, Middle Initial) State: District: 02 Category/ Type Office Sought: House Disbursement For: 2014 Candidate Name Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 Candidate Name Category/ Type Office Sought: House Disbursement For: 2014 Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 2014 Category/ Type Office Sought: House Disbursemen					
Full Name (Last, First, Middle Initial) A. MCSALLY FOR CONGRESS Mailing Address PO BOX 19128 City State Zip Code AZ 85731 Transaction ID: \$B29.4409 Purpose of Disbursement Recount Fund Candidate Name MARTHA E MCSALLY Office Sought: President State Zip Code Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement this Period Category/ Type Office Sought: House Primary General Primary	NAME OF COMMITTEE (In Full)				
Malling Address PO BOX 19128 City State Zip Code AZ 85731 Purpose of Disbursement Recount Fund Candidate Name MARTHA E MCSALLY Office Sought: House Senate Primary General Primary General President State: Disbursement Candidate Name Office Sought: House Senate Primary General Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) Category/ Office Sought: House Senate Primary General State: District: Candidate Name Category/ Office Sought: House Disbursement For: State Zip Code Purpose of Disbursement Candidate Name (Last, First, Middle Initial) Category/ Office Sought: House Disbursement For: Senate Primary General Primary					
Mailing Address PO BOX 19128 City State Zip Code AZ 85731 Purpose of Disbursement Recount Fund Candidate Name MARTHA E MCSALLY Office Sought: House Senate President State Zip Code Purpose of Disbursement For: 2014 State Zip Code Transaction ID : SB29.4409 Amount of Each Disbursement this Period Category/ Type Other (specify) ▼ Recount Full Name (Last, First, Middle Initial) State: Disbursement For: 2014 Senate President Sitate: Disbursement For: 2014 Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General President Sitate: District:				Date of Dishursem	ent
City State Zip Code Purpose of Disbursement Recount Fund Candidate Name MARTHA E MCSALLY Office Sought: President State: AZ District: Q2 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category' Office Sought: President Candidate Name Category' Office Sought: Primary General	MUSALLY FOR CONGRESS				
TUCSON Recount Fund Candidate Name MARTHAE MCSALLY Office Sought: House Senate President State: Disbursement Candidate Name Mailing Address City State Disbursement For: 2014 Primary General Primary General Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement Category/ Type Date of Disbursement this Period Category/ Type	Mailing Address PO BOX 19128				
Purpose of Disbursement Recount Fund Candidate Name MARTHA E MCSALLY Office Sought:	-			Transaction ID :	SR29 4409
Recount Fund Candidate Name MARTHA E MCSALLY Office Sought: State: AZ District: 02		AZ 85731		Transaction ib .	3D29.4409
MARTHA E MCSALLY Office Sought: House President Presid	Recount Fund			Amount of Each D	isbursement this Period
Office Sought: House Senate Primary General Primary General President State: District:					1000.00
Senate President Other (specify) Recount Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate President Other (specify) Other (specify) State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Primary General Category/ Type Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: House State Zip Code Purpose of Disbursement Category/ Type Office Sought: House State Zip Code Purpose of Disbursement This Page (optional) Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate President Other (specify) Subtotal of Disbursement This Page (optional) 1000.00		nent For: 2014	туре		
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B. Mailing Address Date of Disbursement		Other (specify) ▼			
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Candidate Name Category/ Type	City	state Zip Code			
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substate: District: District: Amount of Each Disbursement this Period State: District: Type Other (specify) ▼ Substate: District: District: Disbursements This Page (optional)	Purpose of Disbursement			Amount of Fook D	ish
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State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Subtrotal of Disbursements This Page (optional)					
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Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	Full Name (Last, First, Middle Initial)				
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	С.			Date of Disbursem	ent
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Subtotal of Disbursements This Page (optional)	Mailing Address			M M / D D	/
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	City	state Zip Code			
Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Purpose of Disbursement				
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District: Substruct: 1000.00	Candidate Name		Category/	Amount of Each D	isbursement this Period
Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substitute: Disbursements This Page (optional)			Type		
State: District: SUBTOTAL of Disbursements This Page (optional)	Senate	Primary General			
SUBTOTAL of Disbursements This Page (optional)		omer (specity) ▼			
4000 00	2.53.50				
TOTAL This Period (lest page this line number only)	SUBTOTAL of Disbursements This Page (optional)				1000.00
	TOTAL This Desired (less was a this Processed)				1000.00